PTO/SB/06 (07-06)

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U.S. Patent and Tradent Affice; U.S. Debart Affice; U.S. Debart Chica; U.S.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/631,204			ling Date 31/2003	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
	BASIC FEE		N/A	LD NO.	N/A		N/A	TLL (v)		N/A	TEE (0)
┢	(37 CFR 1.16(a), (b), o	or (c))	-		NIA		N/A		l	N/A	—
뉴	(37 CFR 1.16(k), (f), c		N/A	$-\!\!\!\!+\!\!\!\!-$	N/A		N/A		l	N/A	
TO	(37 CFR 1.16(o), (p), o		N/A		N/A		N/A		OR	N/A	
(37	CFR 1.16(i)) EPENDENT CLAIM	ıs	minus 20 = *			l	x \$ =		OR	X \$ =	
	CFR 1.16(h))			ueeed 100	ļ	x \$ =		l	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 tional 50 t	gs exceed 100 on size fee due for each on thereof. See CFR 1.16(s).							
	MULTIPLE DEPEN	IDENT CLAIM PR	ESENT (3	7 CFR 1.16(j))					1		
* If 1	the difference in colu	umn 1 is less than	r "0" in column 2.		TOTAL]	TOTAL			
	APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY			
Ę	08/22/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
AMENDMENT	Total (37 CFR 1.18(i))	• 17	Minus	 20	= 0	1	X \$25 =	0	OR	x s =	
Ľ١	Independent (37 CFR 1.16(h))	• 2	Minus	***3	= 0	1	X \$105 =	0	OR	x s =	
ğΙ	Application Size Fee (37 CFR 1.16(s))										
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
Г							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
L		(Column 1)		(Column 2)	(Column 3)						
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
<u>ا</u> ي	Total (37 CFR 1,16())		Minus			1	x \$ =		OR	x s =	
AMENDMENT	Independent (37 CFR 1,16(h))		Minus	***		1	x \$ =		OR	x s =	
ā!	Application Size Fee (37 CFR 1.16(s))					1			ı		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
Г							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". **If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". **The "Hichest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.											

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